



Sneak Peak at the Latest Updates to BANT Professional Practice Handbook

Hello there,

The Practice Governance team has updated and expanded a number of areas of the handbook over the past year. The summary below includes updates to guidelines, safe practice and frequently asked questions sent to PPP.

The updates relating to Specific Conditions in particular support BANT members to determine their scope of practice more clearly, and if and when additional training is required post initial qualifications to increase an individual's scope of practice. Recent updates include:

- **Cancer**
- **Gastric Bands & Colostomy Bags, Type 1 Diabetes, Epilepsy**
- **Supplements**
- **Retirement**
- **Continuous Glucose Monitors (CGMs)**
- **Auditing Your Practice - BANT Clinical Self Audit Tool**

These areas cover all aspects of practice for BANT members, including professional, legal, ethical and other regulatory areas such as supplement regulation, novel foods and data

protection. Practice Governance provides guidance about safe practice and we hope you find this summary of updates useful. More information is available in the [BANT Professional Practice Handbook](#).

Specific Conditions: Cancer

Having worked last year over a number of months with specialists in the field of cancer including Dr Nina Fuller-Shavel and Dr Carol Granger, BANT established new [Cancer Guidelines](#) in order to support client safety and the profession as a whole.

The Guidelines strongly recommend that only Registered Nutritional Therapy Practitioners and BANT Registered Nutritionists® who have completed an appropriately credited or recognised specialist CPD post-qualification should support individuals with a confirmed or suspected cancer diagnosis.

These Guidelines apply to both BANT members in clinical practice and those working with groups or giving talks.

BANT members without specific post-qualification training in cancer have an opportunity to work with clients to provide preventative nutrition and lifestyle recommendations with an aim to help reduce the risk of cancer. They could also support those who have had cancer medication prescribed to them during an active treatment period, are no longer taking any cancer medication, and have been fully discharged.

However, for any BANT members wishing to work with clients with confirmed or suspected cancer diagnosis, or in secondary prevention i.e. working with people who have had cancer and are still taking cancer medication, it is strongly recommended that BANT members complete the additional post-qualification training.

There are two routes to achieve the required additional training available for BANT Members and both are detailed in the [Science and Education](#) section of BANT website.

Specific Conditions: Gastric Bands & Colostomy Bags, Type 1 Diabetes, Epilepsy

[Gastric Bands & Colostomy Bags](#)

NTs are able to work with clients with gastric bands as part of a multidisciplinary team whilst the client is still under the care of a hospital. Once the client has been discharged, NTs can continue to advise on optimising diet and lifestyle for this group of patients. As with all best practice, you are required to seek client consent to write to their GP to update them on the advice given to them during your consultations.

Extra training in this area of health is advisable and can be gained through the British Obesity & Metabolic Surgery Society (BOMSS) and the International Federation for the Surgery of Obesity and Metabolic Disorders (IFSO).

NTs can also work with clients that have colostomy bags. At the initial consultation they should seek the client's consent to write to their GP/consultant to update them on the advice given during the consultation. NTs must respect and never override dietary advice given by the client's consultant, hospital dietitian or other healthcare professional.

[Type 1 Diabetes](#)

As a reminder, NTs are able to work with clients with type 1 diabetes if they feel suitably qualified to support clients with type 1 diabetes.

A food-first approach is recommended, and dietary changes should be introduced slowly with careful monitoring of the client's health throughout. Dietary changes may affect the client's insulin requirements so we advise the GP is kept informed of the dietary support provided by the NT, including nutritional supplementation, with justification for use and contraindications checked.

Epilepsy

BANT recommends that NTs only work with clients with epilepsy if they have undertaken additional training (commonly self-directed CPD/research) in this area to understand different types of epilepsy and the dietary and lifestyle factors that may cause seizure triggers.

If NTs have experience of working with clients with epilepsy and/or have undertaken the research required to understand the type of epilepsy a particular client may have and their known and potential seizure triggers, they may work with the client if they feel confident to do so. In these cases, NTs must work in collaboration with the other healthcare and medical professionals as part of the client's multi-disciplinary team.

BANT recommends contacting the client's GP initially (with their permission) to advise them that you will be working with the client and implementing dietary changes to improve the client's wellbeing. Should supplemental support be considered, we advise NTs to obtain approval for any supplement recommendations from your client's consultant first, explaining your rationale and confirming that you have checked for drug/nutrient interactions.

Supplements

Further updates in 2023 related to the scope of supplements with a focus on DIM, CBD, GABA and Melatonin, subject of many enquiries received by Professional Practice Panel (PPP).

BANT reviewed the [legal position for these supplements](#) and none of them are currently authorised for sale in the UK as food supplements, which means that these supplements are not authorised for NT use in the UK.

BANT appreciates that some of our clients use these products and buy them either abroad or in the UK as products going through the FSA process can remain on sale. It is beneficial for NTs to understand the function, contraindications and cautions of these products based on the latest science, while being clear that NTs cannot recommend them to their clients.

Consultation Documentation & Practices: Storing & Deleting Client Records: Retirement

The [Storing & Deleting Client Records](#) section of the Handbook was expanded to reflect recommended arrangements for practitioners approaching retirement age and also to put practices in place to safeguard practitioners legal standing in terms of record management for any future illness which may occur. Although this is a subject with no immediate urgency for many, recommendations are in line with ICO best practice and we would therefore urge all Members to consider this update and plan for the future.

If an NT is approaching retirement age, they should consider who they would nominate to

take over their clients and the responsibility of client record retention. If the NT does not have clients to transfer, they still need to consider who will have responsibility for client record retention. This role is known as a Data Controller, with responsibility to determine what data is collected, how it is used and with whom it is shared. You as a practitioner hold the role of Data Controller while practising.

An NT could make an arrangement with a practice situated locally to them, fellow practitioner, record storage facility, lawyer or other medical professional for the transfer of both records and the role of Data Controller. These organisations are considered to be of “legitimate interest” with a similarly compatible lawful basis, therefore prior client consent is not required for this data transfer. Clients would, however, need to be informed if a transfer is to take place.

A file detailing all client records and dates for them to be destroyed, exactly 8 years after the date of the final consultation should be maintained with all the records.

The Data Controller must be aware of and follow their obligations and responsibilities. Planned arrangements should be clear in the Terms of Engagement and information to clients so that their privacy arrangements are understood. BANT strongly advises NTs to take a long-term view of this aspect of their professional work.

If a practitioner dies and has not made provision, the records would still need to be kept and passed to an organisation of equal legitimate interest.

These guidelines are in line with CNHC guidance and UK GDPR and are recognised as the professional standard.

Wearable Health Technologies: Continuous Glucose Monitors (CGMs)

A [CGM](#) is a medical device that is used to monitor and track blood glucose levels in real time throughout the day and night. It is particularly useful for people with diabetes or pre-diabetes who need to closely manage their blood sugar levels. It is also increasingly used by people who want to maintain good health and avoid metabolic disease.

Practitioners should be aware of the risk of CGM use with clients with obsessive behaviours, health anxiety or a history of disordered eating. Please refer to the Handbook Section Eating Disorders & Disordered Eating for further information.

With consent, data from a CGM can be shared with a clinical health professional, including NTs. As with all clinical data, NTs are advised to ensure that consent is provided by the client for access and storage of this data, and that data is [managed effectively based on the UK GDPR](#).

CGM sensors are applied to the skin, often on the upper arm or abdomen and normally need to be changed every few weeks. The insertion of the sensor into the skin is regarded as an invasive procedure. NTs are not able to undertake any invasive services, including phlebotomy or finger-prick testing, unless they have completed full phlebotomy training. Therefore, BANT’s guidance is that NTs who have not had phlebotomy training:

- Should not undertake the application of a CGM sensor on a client.
- Should refer their clients to the CGM suppliers’ instructions on how to apply the CGM sensor.

For further information on CGMs please see below two Webinars listed in the BANT Learning Zone under category Metabolism.

The titles of the webinars are as follows:

- **“State of Cardiovascular and Metabolic Disease: A Bitter Sweet Tale”**. Presented by Vimal Ramjee MD, Director of Health, Veri
- **“Understanding CGM Data for Practitioners and Applications for Client Care”**. Presented by Emily Johnson, MS, RD, Research Lead at Veri

Auditing Your Practice - BANT Clinical Self Audit Tool

The [BANT Clinical Self-Audit Tool](#), located in the [Auditing Your Practice section](#), is based on the requirements for Registered Nutritional Therapy Practitioners, as BANT members, following the standards, ethics and performance expected of registered complementary health practitioners on the CNHC register.

It is relevant to all Registered Nutritional Therapy Practitioners regardless of whether you practise from home, in your own or rented premises, or are employed to work on a one-to-one basis as a Registered Nutritional Therapy Practitioner.

Note that group work is not regulated by the CNHC and therefore requirements for group work are not part of the clinical self-audit tool. Find out more about group work in the BANT Professional Practice Handbook/group work. The same rules apply for the health and safety of premises in relation to group work as is the case for a clinic.

The aim is for the audit to provide practical support to ensure your work in clinical practice meets professional standards. There is an action plan available to check progress and any questions can be referred to BANT at bantpractice@bant.org.uk. You can reflect and report on your findings as part of your professional CPD.

Another means of acknowledging a commitment to professionalism is the BANT Fitness to Practice Declaration. This forms part of the annual membership renewal process and is an affirmation by all BANT full members, Registered Nutritional Therapy Practitioners and BANT Registered Nutritionists®, of their commitment to upholding the highest standards of conduct, ethics and performance in relation to clients, the nutritional therapy profession and the broader professional landscape and community.

Ongoing Support from the Practice Governance Team

Don't forget, as Members, you have 24/7 access to the BANT Professional Practice Handbook and the Professional Practice Panel (PPP) are available by email by writing to bantpractice@bant.org.uk for any queries you have.



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